Memorandum of Understanding between the North Carolina Department of Health and Human Services and the North Carolina Department of Correction

This Memorandum of Understanding (MOU) and Appendices are entered by and between the Department of Health and Human Services and the Department of Correction for the purpose of developing a comprehensive offender management model that ensures public safety while addressing the needs of offenders. Currently, the Division of Community Corrections (DCC), the Criminal Justice Partnership Program (CJPP) and the Treatment Alternatives to Street Crime (TASC) Network are the primary resources involved in community corrections. The Division of Alcoholism and Chemical Dependency Programs (DACDP) and Division of Prisons (DOP) impact community corrections through the release of offenders who have received services while in custody. The purpose of a comprehensive offender management model is to create a seamless system built on the ideals of integrated service delivery and coordination of resources that provide effective interventions for offenders.

With DCC, CJPP, and TASC available under the community corrections umbrella and a structured link with DACDP and DOP for transitioning offenders, the Offender Management Model (OMM), as described in the Appendices, presents a systemic model for screening and assessing offenders, matching them to the appropriate intervention(s) and managing their case plans. Utilizing the principles of effective interventions, we can reasonably assert that the OMM will be successful in modifying offender behavior. The objectives of the OMM are:

- To create a seamless system of care for the provision of services to offenders;
- To clarify roles in providing control and treatment;
- To reduce the rate of revocation for technical and drug violations;
- To combine efforts to guarantee the effective utilization of limited resources and prevent duplication;
- To provide cognitive behavioral interventions;
- To develop an integrated information system; and
- To ensure Probation, CJPP, DACDP, DOP and TASC staff are trained to implement the OMM.

The target population for the OMM is primarily Intermediate Punishment offenders. However, Community Punishment violators (at-risk for revocation), residential community corrections graduates, and post-releasees who have completed a treatment program will also be eligible for this model. Offenders meeting the eligibility criteria will be screened and assessed using standardized instruments that focus on criminogenic need, substance abuse and ancillary needs (such as housing, educational achievement, and employment skills). Through the assessment process, the offender's needs will be identified and prioritized in the case plan for service delivery.

Once the assessment is complete, the individual case planning process will begin. A unified case plan will be developed for the offender by Probation Officers, TASC Care Managers, DACDP and CJPP staff. This team-initiated, unified case plan supports a seamless system and further reinforces collaboration and coordination into a process of practical application. An offender's case plan will include the elements of treatment and control necessary to ensure compliance in both areas. Cognitive behavioral interventions will be used widely in this model to assist with skill building and cognitive restructuring. Research demonstrates that targeting antisocial attitudes, values and beliefs using cognitive behavioral interventions result in reductions in recidivism.

In addition, the model will monitor and track numerous shared outcomes. The criminal justice and public healthcare systems must embrace stated goals of reducing recidivism and controlling criminal behavior to sustain the OMM's focus on outcomes. The common emphasis on reducing recidivism brings the two systems into alignment, and requires each to rethink operations and priorities based on shared goals. Furthermore, the team approach helps to maximize resources and make reallocation decisions apparent. Each entity will assist in monitoring the offender's progress through regularly scheduled case staffings. Probation, TASC, DACDP, DOP and CJPP staff will exchange information and make referrals regarding sanctions, treatment and service needs to existing community-based service providers.

Each entity will need to operationalize the Offender Management Model to their unique set of offender needs and resources. Specifically, an MOU governing the implementation of the model at the local level must be developed and negotiated then signed by the appropriate authorized representatives.

This MOU and Appendices will remain in effect until renegotiated by authorized representatives from the participating agencies. This MOU and Appendices shall be reviewed as necessary, not less than every two years. This MOU and Appendices may be amended, if mutually agreed upon and approved by Department Secretaries, to change the scope and terms. Such changes shall be incorporated as a written amendment to this MOU and Appendices.

Department of Health and Human Services	Department of Correction
BY: <u>Signature on File</u> H. David Bruton, M.D., Secretary	BY: <u>Signature on File</u> Theodis Beck, Secretary
DATE:	DATE:

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Appendix I North Carolina Offender Management Model (OMM)

The Offender Management Model (OMM) is a joint effort between the Department of Correction (DOC), Division of Community Corrections (DCC), Division of Alcoholism and Chemical Dependency Programs (DACDP) and Department of Health and Human Services (DHHS), Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS). OMM embodies the partnership between these agencies. DCC and Treatment Alternatives to Street Crime (TASC) are committed to providing treatment and control of high risk/high need offenders under supervision in the community. DACDP is committed to providing treatment to offenders participating in DACDP programs. Utilizing principles of effective interventions, this partnership between the DOC and DHHS, will promote consistent matching of treatment and supervision levels for quality offender management.

TASC, Probation Services, DACDP and CJPP agree to:

- A. Develop a unified case/service plan specific to the offender's needs in order to accomplish mutually agreed upon goals;
- B. Promote an open exchange of information in accordance with rules of confidentiality and legal waivers and/or releases of information including Federal Confidentiality Rules (42 CFR Part 2); and
- C. Abide by and promote the use of the principles of effective interventions with offenders.

Treatment Alternatives to Street Crime's (TASC) mission is to provide clinical assessment, treatment matching, referral and care management services to offenders.

TASC agrees to:

- A. Screen and clinically assess all appropriate referrals;
- B. Match offenders' needs with appropriate treatment services, paying special attention to responsivity issues;
- C. Make the appropriate service referrals;
- Monitor an individual service plan based on the results of the assessment and update the service plan based on treatment progress, collateral contacts and case staffings;

- E. Provide care management services for all offenders meeting the eligibility criteria for the OMM:
- F. Manage the offenders' progress in the recommended level of care;
- G. Obtain appropriate releases of information to allow the exchange of information between TASC, Probation, CJPP, DACDP and DOP;
- H. Participate in regular case staffings with the appropriate Probation, DACDP and CJPP staff;
- Integrate current Probation and TASC violation/non-compliance policies into the OMM and provide assistance in reporting non-compliance/violations to court;
- J. Administer drug screens according to the DCC Substance Abuse Screening Program policy;
- K. Determine, at the local level, transportation arrangements for drug screen samples collected and be ultimately responsible for any drug screens collected by TASC; and

Probation Services' mission is to provide control and supervision of offenders in the community.

Probation Services agrees to:

- A. Provide control and supervision of all offenders meeting the eligibility criteria of the OMM;
- B. Identify and refer eligible offenders to TASC for screening and assessment;
- C. Develop an individual case plan based on probation judgment and risk assessment;
- D. Facilitate compliance with the treatment recommendations resulting from the common assessment instrument;
- E. Provide TASC with copies of the Judgment, Post-Release Agreement, OPUS number and all pertinent documentation necessary to facilitate delivery of services;
- F. Identify and enforce sanctions and supervision levels to match and address offender risk:

- G. Participate, as Team Leader, in regular case staffings with appropriate TASC, DACDP and CJPP staff;
- H. Integrate current Probation and TASC violation/non-compliance policies into the OMM and provide assistance in reporting non-compliance/violations to court;
- I. Obtain appropriate releases of information in order facilitate the exchange of information between TASC, Probation, CJPP, DACDP and DOP;
- J. Provide the supplies necessary for drug screening to TASC and CJPP according to the DCC Substance Abuse Screening Program policy; and
- K. Assist in the identification of needs of target populations for which substance abuse services appear to be indicated and to communicate its findings to DHHS for the purpose of coordinating the provision of such services.

Criminal Justice Partnership Program's (CJPP) mission is to provide ancillary services and purchase treatment for offenders meeting the eligibility criteria.

CJPP agrees to:

- A. Screen offenders for CJPP eligibility;
- B. Provide ancillary services and purchase treatment services for all offenders meeting the eligibility criteria for CJPP and OMM;
- C. Monitor an individual service plan based on the results of the assessment and update the service plan based on treatment progress, collateral contacts and case staffings;
- D. Obtain appropriate releases of information to allow the exchange of information between TASC, Probation, CJPP, DACDP and DOP;
- E. Make the appropriate referrals for ancillary services;
- F. Participate in regular case staffings with the appropriate Probation, DACDP and TASC staff;
- G. Integrate current Probation and TASC violation/non-compliance policies into the OMM;

- H. Administer drug screens according to the DCC Substance Abuse Screening Program policy;
- Determine, at the local level, transportation arrangements for drug screen samples collected and be ultimately responsible for any drug screens collected by CJPP; and
- J. Assist in the identification of needs of target populations for which substance abuse services appear to be indicated and to communicate its findings to DHHS for the purpose of coordinating the provision of such services.

Division of Alcoholism and Chemical Dependency Programs' (DACDP) mission is to develop and implement programs that provide appropriate treatment for offenders with alcohol and chemical dependency problems.

DACDP agrees to:

- A. Utilize standard screening and assessment instruments;
- B. Provide appropriate substance abuse services to offenders assigned to DACDP;
- C. Assist in the identification of needs of target populations for which substance abuse services appear to be indicated and to communicate its findings to DHHS for the purpose of coordinating the provision of such services;
- D. Refer offenders to substance abuse services in as timely a manner as possible;
- E. Monitor an individual service plan based on the results of the assessment and update the service plan based on treatment progress, collateral contacts and case staffings;
- F. Participate in regular case staffings with the appropriate Probation, TASC and CJPP staff:
- G. Provide to the appropriate service provider pertinent background information necessary to facilitate the provision of substance abuse services in accordance with all applicable statutes and rules;
- H. Obtain appropriate releases of information to allow the exchange of information between TASC, Probation, CJPP and DOP; and
- I. Administer drug screens according to the DCC Substance Abuse Screening Program policy.

The Office of Research & Planning's mission is to provide consultation regarding Cognitive Behavioral programming, assessment and evaluation efforts.

Research and Planning agrees to:

- A. Provide staff assistance in the development and execution of a survey of available treatment resources in North Carolina;
- B. Provide training in the Principles of Effective Interventions with Offenders;
- C. Provide training in the principles of Cognitive Behavioral programming; and
- D. Provide consultation and staff to assist in the implementation of program evaluation efforts.

Appendix II North Carolina Offender Management Model (OMM)

- Figure 1. North Carolina Criminal Justice Flow Chart
- Figure 2. North Carolina Offender Management Model Diagram